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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted With Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

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Attorney Docket Number	PHUS030242US -
First Named Inventor	MUEHLLEHNER, et al.
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Art Unit	
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IMAGING SYSTEM WITH NON-CIRCULAR PATIENT APERTURE

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) **09/08/2003** as United States Application Number or PCT International

Application Number **60/501,200** and was amended on (MM/DD/YYYY) (if applicable).

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application

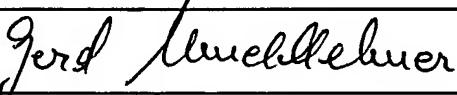
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date

before that of the application on which priority is claimed.				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number _____ <input type="checkbox"/> Correspondence address below or Bar Code Label				OR	<input type="checkbox"/> Correspondence address below	
Name Thomas E. Kocovsky, Jr. - FAY, SHARPE, FAGAN, MINNICH & McKEE, LLP						
Address 1100 Superior Avenue, Seventh Floor						
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Country US		Telephone 216/861-5582		Fax 216/241-1666		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) Gerd			Family Name or Surname MUEHLLEHNER			
Inventor's Signature 					Date 8/4/03	
Residence: City WAYNE	State PA	Country US		Citizenship US		
Mailing Address 404 OAK LANE						
City WAYNE	State PA	ZIP 19087		Country US		
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) Michael			Family Name or Surname GEAGAN			
Inventor's Signature 					Date 9/1/03	
Residence: City WAYNE	State PA	Country US		Citizenship US		
Mailing Address 15 FOREST ROAD						
City WAYNE	State PA	ZIP 19087		Country US		
<input type="checkbox"/> Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.						